



# Children, Youth and Families MEMBERSHIP FORM

Please keep this page for your records

## Our Mission

Our mission is to empower children, youth, and families to be active, responsible members of society while strengthening their connection to the communities in which they live.

## Our Services

We offer a variety of bilingual (English/Spanish) services to help the City of Longmont's children, youth, and families reach their greatest potential.

Services include:

Youth Development and Enrichment  
Homework Help, Tutoring, and Post-Secondary Planning  
Family Support and Parenting Classes  
Professional Counseling Services  
Early Childhood Education and Literacy  
Community Involvement and Service Programs

## Youth Center Zone Program Agreement

The Zone Program provides no-cost out-of-school-time enrichment, leadership, and social skills opportunities for youth in grades 6th – 12th. By attending Zone Programs, youth and their guardians agree:

- Youth will follow the rules and expectations set forth by the Youth Center community
- Youth will follow the rules and expectations set forth by City Standards of Behavior
- Youth will be involved in at least one class or activity each day they attend
- Youth will respect people, property, and themselves
- Youth will give new ideas and share their thoughts
- Youth will have some fun!

Youth Center staff reserve the right to ask youth to leave at any time for not abiding by the agreement.

## Hours and Phone Numbers

1050 Lashley St. Longmont, CO 80504 **Main Office:** 8am-5pm | **Phone:** (303) 651-8580  
**Zone Program:** 2:30-6pm (school days), 12-5pm (school holidays/summer) | **Phone:** (303) 774-3767  
Building and programs are closed on weekends and all City Holidays, call or check our websites for information regarding weather-related closures.



# City of Longmont Standards of Behavior

The below standards of behavior are enforced in our City of Longmont grounds and facilities. We use these standards with our youth at Children, Youth, and Families as a way to guide and teach. It is our hope to support families in guiding youth to adhere to these standards, as the consequences for violation in other city facilities are more severe.

Thank you for the privilege of working with your youth, we appreciate the partnership with your family.

## TIER 1

Behaviors, language, & items not tolerated under any circumstances and will result in a minimum two day suspension:

Illegal drug possession and associated paraphernalia  
Marijuana/ [Alcohol] Use  
Weapons possession, except as permitted by law, including items that may be used as weapons.  
Pornography viewing.  
Sexual activity or simulated sexual acts.  
[Fighting, assault or attempted assault.]  
Smoking cigarettes and e-cigarettes.  
Obscene, profane, threatening, abusive, or racially disparaging language, gestures, and behaviors.  
Public urination or defecation.  
Harassment or intimidation of staff or other customers.  
Vandalism, theft, abuse or damage of the facility or its contents, or another person's belongings.  
Consumption of alcohol/liquor except where allowed by license.  
Any criminal conduct not otherwise listed above.

## TIER 2

Other related behavior issues which may be deemed inappropriate and may result in a conversion with parent [or suspension]:

Disruptive music, or voices or other disruption that interferes with the normal use and operation of the facility.  
[Noncompliance with programmatically-relevant staff directions and expectations]  
Obstruction of walkways or common areas.  
Unsanitary hygiene so offensive so as to constitute a nuisance to, or impede use of the facility by, staff and other persons (including but not limited to body odor, use of perfume or body sprays, bed bugs, etc.).  
Sleeping or laying down that interferes with the normal use and operation of the facility.  
Panhandling.  
Leaving personal property unattended, including but not limited to bags and backpacks.  
[Public displays of affection]  
Littering

## Confidentiality Statement

Longmont Children, Youth and Families staff and volunteers are by law mandatory reporters in Colorado. A mandatory reporter is defined as a professional who is obligated by law to report known or suspected incidents of child abuse and/or neglect. Mandatory reporters are part of the safety net that protects children and youth and have the ability to provide lifesaving help to child victims in our community.

If Longmont Children, Youth and Families, staff and volunteers have reasonable cause to know or suspect that a person who is a minor, is elderly, or has disabilities has been subjected to abuse or neglect, or observed being subjected to circumstances or conditions that would reasonably result in abuse or neglect, Longmont Children, Youth and Families staff shall immediately upon receiving such information report this to the appropriate agency.

Longmont Children Youth and Families Counselors are required to initiate a mental health evaluation of a participant who is imminently dangerous to self or others (suicidal or homicidal), or who is gravely disabled due to a mental disorder and if necessary, report this to the appropriate agency.



# Children, Youth and Families MEMBERSHIP FORM

**Admin Only:**

\_\_\_ Copied  
\_\_\_ Entered  
\_\_\_ Filed

**Releases:**

\_\_\_ Photo  
\_\_\_ School

## Youth Information (Required)

\_\_\_\_\_  
First Name                      Middle Name                      Last Name

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of birth                      Grade, School Attended                      Nickname / preferred name

\_\_\_\_\_  
Street Address                      City                      State                      Zip Code

Guardian's email: \_\_\_\_\_ ☐ YES! I'd like to receive the monthly CYF Newsletter

## Legal Guardian Information (Required)

\_\_\_\_\_  
First Name                      Last Name                      Employer

\_\_\_\_\_  
Cell / home phone number                      Emergency / secondary phone number ☐ Youth primarily resides with this guardian

## Secondary Guardian Information (Required)

\_\_\_\_\_  
First Name                      Last Name                      Employer

\_\_\_\_\_  
Cell / home phone number                      Emergency / secondary phone number ☐ Youth primarily resides with this guardian

The Youth Center will at times take youth on field trips. In-town field trips (to locations such as the Recreation Center and Sunset Pool) will be taken without a consent form, while trips out of town will require filling out an additional consent form.

**Please inform staff if you do not want your child to be allowed on in-town field trips.**



# Required Medical Information

## Minor Child Release, Liability Waiver and Hold Harmless Statement for Participation in Programs sponsored by the City of Longmont:

I understand that there are certain risks involved with participating in the City of Longmont activity identified above. On behalf of my minor child identified above, I hereby RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS THE CITY OF LONGMONT, ITS OFFICERS, AGENTS, VOLUNTEERS, ASSISTANTS AND EMPLOYEES, from any and every claim, demand or action of any kind arising due to bodily injury, illness, death and/or property damage resulting from an incident which may occur to my minor child as a result of my minor child's participating in the City's activities. This RELEASE, LIABILITY WAIVER AND HOLD HARMLESS STATEMENT does not apply if such injury, death or damage is caused by the willful, reckless or gross negligence of the City of Longmont, its officers, agents, volunteers, assistants or employees.

Signature of Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

## EMERGENCY MEDICAL AUTHORIZATION:

I furthermore give permission to the City of Longmont and its employees and volunteers to obtain emergency medical treatment for my child(ren) or the child(ren) over whom I have legal custody, each of whom is listed above. I understand that all reasonable effort will be made to contact me prior to seeking medical care for the child(ren) listed above. If I cannot be reached, the City of Longmont will exercise reasonable judgment in seeking medical treatment for my child. The City of Longmont may contact the following health care provider for medical treatment or other health care providers if the health care provider listed below is not available.

Signature of Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

## RELEVANT MEDICAL INFORMATION:

\_\_\_\_\_  
\_\_\_\_\_

Can youth swim? Yes / No

## YOUTH AGREEMENT (Required)

- I will follow the rules and expectations set forth by the Youth Center community
- I will follow the rules and expectations set forth by the City Standards of Behavior
- I will be involved in at least one class or activity each day I attend
- I will respect people, property and myself.
- I will give new ideas and share my thoughts.
- I will have some fun!

Youth Signature \_\_\_\_\_ Date \_\_\_\_\_

*Youth Center staff reserve the right to ask youth to leave at any time for not abiding by this agreement.*

## GUARDIAN AGREEMENT (Required)

As the legal Guardian of \_\_\_\_\_, I hereby attest that I have read and agree to all of the information provided to me in this membership form. In addition, I agree to the expectations and standards set forth with regards to my youth's behavior and participation. I attest that the information I have given is, to the best of my knowledge, true and correct. Should any changes need to be made to my contact information, I agree to notify Children, Youth, and Families immediately.

Signature of Legal Guardian: \_\_\_\_\_ Date \_\_\_\_\_



# Authorization to Release Information

(Allows Youth Center to communicate effectively with schools/teachers about your youth)

I, \_\_\_\_\_ hereby authorize Longmont Children,  
(Name of Legal Guardian OR youth if signing for themselves)

Youth and Families to release information concerning services provided to me or my child/ward. I also allow inspection and reproduction of records in their possession pertaining to me or my child/ward by any authorized representative of the agency listed below. I release Longmont Children, Youth and Families employees, the agency or the institution from any and all liability for supplying such information.

Name, address and contact person of source of information:

St. Vrain Valley School District

\_\_\_\_\_  
Name of Agency or School

\_\_\_\_\_  
Name of School

\_\_\_\_\_  
Name of School Counselor

395 S. Pratt Parkway

Longmont

CO

80501

\_\_\_\_\_  
Agency or School Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

I certify that this request has been made voluntarily. I understand this authorization shall continue in effect for twelve (12) months unless rescinded earlier by written notice to Longmont Children, Youth and Families. I understand that I may revoke this authorization at any time by giving written notice to Longmont Children, Youth and Families; however, I also understand that any information released prior to my revoking this authorization in writing shall not be considered a breach of my right to confidentiality. I hereby release all of the parties listed above from liability which may result from furnishing this information.

Signature of Client (Youth) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Witness \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian of \_\_\_\_\_ Date \_\_\_\_\_  
Minor if under age 12

Signature of Witness \_\_\_\_\_ Date \_\_\_\_\_





# Photograph Release

(allowing Youth Center to take and use pictures for publicity)

To more effectively promote programs and activities sponsored by the City of Longmont, the City of Longmont seeks the permission of program and activity participants to photograph and/or video (referred to as photograph) the participants and/or their child/children/ward(s) participating in City of Longmont programs and activities.

Please complete the following optional section:

I, \_\_\_\_\_, the parent or legal guardian of \_\_\_\_\_, permits the City of Longmont to take and use photographs of me and/or my child/children/ward(s), and copyright them, for the purpose of promoting City of Longmont programs and activities. This includes permission to publish photographs of me and/or my child/children/ward(s) for such purpose and to the use of any printed matter in conjunction with the photographs. I understand that such photographs of me and/or my child/children/ward(s) remain the property of the City of Longmont.

I also waive any right that I may have to inspect or approve the finished product or products, or the advertising copy or printed matter that may be used in connection therewith, or the use to which it may be applied. I release, and agree to save harmless the City, its officers, agents, volunteers, assistants, and employees, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of the photographs or in any subsequent processing, as well as any publication, even though it may subject me to ridicule, scandal, reproach, scorn, and indignity.

I am 18 years old or older and have every right to sign this release on my behalf and/or on behalf of my child/children/ward(s).

**Signature of Parent of Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_